



**STATE OF TENNESSEE
ALCOHOLIC BEVERAGE COMMISSION
226 CAPITOL BOULEVARD BUILDING, SUITE 300
NASHVILLE, TENNESSEE 37243-0755**



PHONE 615.741.1602

FAX 615.741.0847

ANNUAL REPORT FORM

Name of Beer Board: _____ Reporting Year: _____

Address: _____

Contact Person: _____

Phone Number _____ Email: _____

Please complete all of the following questions.

1) Total number of beer permits issued for **off premises** consumption: _____

2) Total number of violations for sale of beer to a person under 21 years of age: _____

a) How many violations were the result of a "sting" operation? _____
*please see T.C.A. § 39-15-413 for the definition of "sting"

b) How many violations occurred at an establishment participating in the responsible vendor program?

c) If a "sting" was conducted at a responsible vendor, how many persons under 21 years of age were successful in making the purchase? _____

d) List name of the licensee or permit holder where each violation occurred:
(attach additional sheets if necessary)

e) List the specific penalty imposed by the beer board for each violation listed above:
(attach additional sheets if necessary)

(f) Other than sales to a person under the age of 21, how many other violations occurred?

(i) Please list types of violations that occurred other than sales to a person under 21 years of age: (attach additional sheets if necessary)

This report is required to be filed with the Tennessee Alcoholic Beverage Commission pursuant to T.C.A. § 57-5-605. **Report must be filed by February 1st**